



PATENT  
Attorney Docket No. ICO-004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Elsbree *et al.* CONFIRMATION NO.: 2147  
SERIAL NO.: 09/478,775 GROUP NO.: 2174  
FILING DATE: January 6, 2000 EXAMINER: Nguyen, Le V  
TITLE: GRAPHICAL HUMAN-MACHINE INTERFACE ON A PORTABLE  
DEVICE

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 11<sup>th</sup> day of January 2005.

  
Katherine Gu

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

1. Transmittal From (1 pg.);
2. Fee Transmittal (1 pg.);
3. Petition for Extension of Time under 37 CFR 1.136(a) (1 pg.);
4. Amendment and Response (11 pgs.);
5. A Check in the amount of \$60.00; and
6. Return Receipt Postcard.

# FEE TRANSMITTAL FY 2005

Complete if Known

Application Serial Number	09/478,775
Filing Date	January 6, 2000
First Named Inventor	Elsbree
Group Art Unit	2174
Examiner Name	Nguyen, Le V
Attorney Docket No.	ICO-004

## METHOD OF PAYMENT

☒ Payment Enclosed:

☒ Check ☐ Money Order ☐ Other

2. ☒ The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531.

☐ Required Fees (copy of this sheet enclosed).

☒ Additional fee required under 37 CFR 1.16 and 1.17.

☒ Overpayment Credit.

3. ☒ Applicant claims small entity status.

## FEE CALCULATION

### 1. FILING/SEARCH/EXAM/SIZE FEES

#### Large Entity

Fee (\$)	Fee Description	Fee Paid
300	Utility filing fee	
500	Utility search fee	
200	Utility exam fee	
250	Utility size fee (each add'l 50 pgs. over 100)	
200	Design filing fee	
100	Design search fee	
130	Design exam fee	
250	Design size fee (each add'l 50 pgs. over 100)	

Number Filed	Number Extra	Rate	Amount
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Total Claims - 20 = x \$ 50.00 =

Independent Claims - 3 = x \$200.00 =

☐ Multiple Dependent Claim(s), if any \$360.00 =

TOTAL:

SMALL ENTITY DISCOUNT:

SUBTOTAL (1) (\$) 0.00

### 2. AMENDMENT CLAIM FEES

Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid
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Total - = x \$ 50.00 =

Indep. - = x \$ 200.00 =

☐ First Presentation of Multiple Dep. Claim + \$ 360.00 =

TOTAL: (\$)

SMALL ENTITY DISCOUNT: (\$)

SUBTOTAL (2) (\$)0.00

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	Request for ex parte reexamination	
120	60	Extension for reply within first month	60.00
450	225	Extension for reply within second month	
1020	510	Extension for reply within third month	
1590	795	Extension for reply within fourth month	
2160	1080	Extension for reply within fifth month	
500	250	Notice of Appeal	
500	250	Filing a brief in support of an appeal	
1000	500	Request for oral hearing	
400	400	Petitions to the Commissioner (Gp. I)	
200	200	Petitions to the Commissioner (Gp. II)	
130	130	Petitions to the Commissioner (Gp. III)	
180	180	Submission of Information Disclosure Statement	
790	395	Filing a submission after final rejection (37 CFR 1.129(a))	
790	395	For each additional invention to be examined (37 CFR 1.129(b))	
100	100	Certificate of Correction for applicant's error	
130	65	Submission of Terminal Disclaimer	
Other fee (Specify)			
Other fee (Specify)			

SUBTOTAL (3) (\$) 60.00

SUBTOTAL (1) 0.00

SUBTOTAL (2) 0.00

SUBTOTAL (3) 60.00

TOTAL (\$) 60.00

## CORRESPONDENCE ADDRESS

Direct all correspondence to:

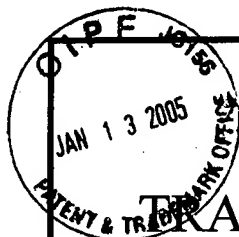
Patent Administrator  
Testa, Hurwitz & Thibault, LLP  
High Street Tower-125 High Street  
Boston, MA 02110  
Tel. No.: (617) 248-7000  
Fax No.: (617) 248-7100

## SIGNATURE BLOCK

Respectfully submitted,

*James De Vellis*  
James De Vellis  
Attorney for the Applicants  
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High Street Tower-125 High Street  
Boston, MA 02110

Date: January 11, 2005  
Reg. No.: 52,814  
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# TRANSMITTAL FORM

Application Serial Number 09/478,775  
Filing Date January 6, 2000  
First Named Inventor Elsbree  
Confirmation No.: 2147  
Group Art Unit 2174  
Examiner Name Nguyen, Le V  
Attorney Docket No. ICO-004  
Patent No. Not applicable  
Issue Date Not applicable

## ENCLOSURES (check all that apply)

- |   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form   | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application<br><input type="checkbox"/> Formal Drawing(s)<br><input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application<br><input type="checkbox"/> Small Entity Statement<br><input type="checkbox"/> CD(s) for large table or computer program<br><input type="checkbox"/> Amendment After Allowance<br><input type="checkbox"/> Request for Certificate of Correction<br><input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><input type="checkbox"/> Appeal Brief (in triplicate)<br><input type="checkbox"/> Status Inquiry<br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8<br><input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8<br><input type="checkbox"/> Additional Enclosure(s) (please identify below) |
| <input checked="" type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] |   |   |
| <input checked="" type="checkbox"/> Petition for Extension of Time  |   |   |
| <input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> Copies of IDS Citations   |   |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)   |   |   |
| <input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above   |   |   |

## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
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High Street Tower  
125 High Street  
Boston, MA 02110  
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Date: January 11, 2005  
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